State of South Dakota



Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition. PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070

See pages 9 & 10 of the Guideline Book for	specific instructions on completing this report.
	nie M. Boomgarden
Complete Mailing Address 27348	461 AVE Chancellor SD 57015
Name of Person Making Report Jamze	Booma arden Daytime Phone Number 605 33 5000
If you are a candidate, what office are you se	eeking? District 17 House of Representation
If you are a ballot question committee, indicate reporting period and whether the measure was	eate which measure(s) the committee was involved with during the eas supported or opposed.
Type of Report (See pages 4 & 5 of Guidelin	ne Rook)
For Reporting Period Ending (See pages 4 &	25 of Guideline Book) June 25 2004.
The following verification must be complete	ed before submitting report.
VERIFICATION OF PERSON MAKING R	REPORT
I Jam IE Boomgard this report and to the best of my knowledge	
Date: $S-2S-04$	JAMES ST.
	Candidate Signature or Signature of Committee Treasurer or Chairperson
Revised July 2001	Filed this 2 Hb May day of Chie Melson SECRETARY OF STATE

Name of Candidate or Committee Jamie Boomgar den

For the reporting period ending 5-04

Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contribution		:		*\$
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		Total of Itemized	Contributions from Individual	

THE REPORT OF THE PROPERTY OF	E Boomgarden	
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the reporting period ending $5-04$		
Schedule A – Direct	Contributions (continued)	
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nized Contributions from Political Parties		
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Total of Itemized Con	tributions from Political Action Commi	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

Appendix B

Name of Candidate or Committee:	Jamte	Boomgara	ten
For the reporting period ending:	-04		
	se money for the car	ng Events Proceed didate and the net proceeds gregate being more than \$1	s derived from each event. If
Type or Name of Event			Net Proceeds
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			Total: \$
Schedu Report all non-cash contributions of goods or servic of the contributor, residence address and place of er	es and the estimate		value exceeds \$100, the nam
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Nature of Non-Cash Contribution	Place	of Employment	Estimated Value
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			Trade 0
			Total: \$
Scl	hedule D - Ot	her Income	<u>/</u>
Use this schedule to report any refunds, interest ear	ned or other income	which is not a direct contri	ibution.
Source of Income			Amount
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			Total: \$

_	enses Amount	All contributions to candidates and committees must contributions Made to Candidates and Name of Candidate or Committee	Committees	nount
Advertising Consulting Postage Printing Rent Salaries Felephone Travel Utilities	9 00	Name of Canoniale of Committee		Ø
List other expense items below	List other expense amounts below			***************************************
Bank Check				
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Name of Candidate or Committee:_	5-04 Doomgarden			
For the reporting period ending:	5-04			
Schedule F - Debts and Obligations This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.				
Owed to:	Purpose:	Amount		
		8		

Total Obligations: \$

Unpaid Obligations - Schedule F

Amount on hand at the close of this reporting period. *

This should equal lines (1+3+4+5)-(6+7)